

NOV 05 2004

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PATENT, TRADEMARK, COPYRIGHT
AND UNFAIR COMPETITION LAW
AND RELATED LITIGATION

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November 5, 2004

FACSIMILE COVER SHEET

To: Examiner John M. Hotaling
Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22213-1450

From: Douglas A. Scholer
Reg. No. 52,1973

Re: U.S. Patent Application
Serial No. 09/834,529
Filed: April 13, 2001
Applicant: Ach
Art Unit: 3713
Confirmation No.: 4021
Our Ref: LOTC/32

Fax: 703-872-9306

Enclosures:

Fax Cover Sheet containing Certificate of
Facsimile Transmission (1 page)
Transmittal containing Certificate of
Facsimile Transmission and Authorization
to Charge Deposit Account 23-3000 in the
amount of \$490.00 for the Three-Month
Extension of Time Fee (2 pages)
Amendment and Response containing
Certificate of Facsimile Transmission
(17 pages)

Pages: 20 (including cover sheet)

MESSAGE/COMMENTS
OFFICIAL

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence and the enclosures noted herein (20 total pages, including cover sheet) are being transmitted via facsimile transmission to Examiner John M. Hotaling, Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22213-1450 at 703-872-9306 on November 5, 2004.

Judith L. Volk
Judith L. Volk

November 5, 2004
Date

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4. ☐ Attached is a check in the sum of \$_____ for additional claims.
☐ Please charge my Deposit Account No. 23-3000 in the amount of \$_____.
5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply. Complete (a) or (b) as applicable.

- ☒ (a) Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	<u>Ext. Mos.</u>	<u>Large entity</u>	<u>Small entity</u>
<input type="checkbox"/>	one month	\$ 110.00	\$ 55.00
<input type="checkbox"/>	two months	\$ 430.00	\$ 215.00
<input checked="" type="checkbox"/>	three months	\$ 980.00	\$ 490.00
<input type="checkbox"/>	four months	\$1,530.00	\$ 765.00
<input type="checkbox"/>	five months	\$2,080.00	\$1,045.00

Extension fee due with this request:

\$ 490.00

Method of Payment: Charge Deposit Account 23-3000 in the amount of \$ 490.00

If an additional extension of time is required, please consider this a petition therefor.

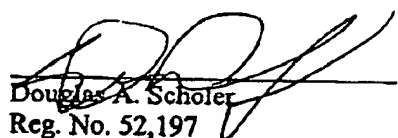
(Check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured and the fee paid thereof of \$_____ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$_____.
OR
- ☐ (b) Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.
6. ☒ If any additional fee for claims or extension of time is required, charge Account No. 23-3000.

Respectfully submitted,

WOOD, HERRON & EVANS, L.L.P.

By:


Douglas A. Scholer
Reg. No. 52,197

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Serial No. 09/834,529

Transmitted for Amendment of November 5, 2004

WHAR 1/10/04